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Feb 20 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000001790 (5)

1. Corporation Name

DODSON FAMILY FOUNDATION, INC.



Principal Place of Business

Mailing Address

C/O MRS. ELIZABETH K. DODSON
7383 ORANGEWOOD LANE, UNIT 303
BOCA RATON FL 33433

C/O MRS. ELIZABETH K. DODSON
7383 ORANGEWOOD LANE, UNIT 303
BOCA RATON FL 33433-7484

3. Date Incorporated or Qualified
04/13/1993

3a. Date of Last Report
03/19/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DODSON, ELIZABETH K.
7383 ORANGEWOOD LANE
UNIT 303
BOCA RATON FL 33433

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PCD	<input type="checkbox"/> DELETE
NAME	DODSON, ELIZABETH K	
STREET ADDRESS	7383 ORANGEWOOD LANE	
CITY - ST - ZIP	BOCA RATON FL 33433	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	KARA, MICHAEL J	
STREET ADDRESS	7383 ORANGEWOOD LANE	
CITY - ST - ZIP	BOCA RATON FL 33433	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	VINCENT, ISABELLE	
STREET ADDRESS	172109 FOOT HILL DRIVE	
CITY - ST - ZIP	SUN CITY AZ	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	WEISS, HOWARD I	
STREET ADDRESS	7155 MANDARIN DRIVE	
CITY - ST - ZIP	BOCA RATON FL 33433	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	VINCENT, THEODORE	
STREET ADDRESS	3838 MANCHESTER AVE	
CITY - ST - ZIP	ENCINITAS CA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Elizabeth K. Dodson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb. 14, 1997 (407) 483-6376
Date Daytime Phone # 0042038

CR2E037 (9/96)